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ABSTRACT

A common assumption in family therapy supervision is that the relationship between supervisor and supervisee changes over time, following a developmental continuum from the tentative competency of the supervisee as a therapist to relative competency. In particular, Ard (1973) theorizes that supervisees and supervisors move steadily together through preceptorship, apprenticeship, mentorship, sponsorship and finally to peership. Everett (1981) presents a different model that likens the process of supervision to that of differentiation, such as the process of moving from childhood to adulthood, with "stormy" transition periods. To examine whether this process of change occurs as presumed by either model, a coding system of 15 response styles was developed for categorizing both the content and intention of statements made by supervisors and supervisees. Using audio tapes from supervisory sessions, the interactions of three supervisors and five trainees were analyzed over a 1-year period. The frequency of the different categories of interaction were compared in the early, middle, and later stages. Analysis of results showed that in the early months, supervisees' statements fell primarily into the following categories: giving information with self-assurance (25%), sharing equally information and ideas (23%), and expressing emotional response to the therapy situation or to supervision (14%). By the third and fourth month, supervisees gave the most statements in the categories of giving information with self-assurance (17%) and giving facts or expressing feelings/interpretations in such a way as to impede responses from the other person (15%). By the end of the period, 89% of the supervisees' statements were in the category of sharing equally information and ideas. The findings were compared with Ard and Everett's models and indicate that the supervisory process does not move steadily to a collegial stage as Ard suggests, but does follow the path outlined by Everett. (JAC)

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OBSERVING CHANGE IN THE FAMILY THERAPY SUPERVISORY RELATIONSHIP

BY Caryl T. Moy, Ph.D. and Earl O. Goodman, D.Ed.

A common assumption in family therapy supervision is that the relationship between supervisor and supervisee changes over time, following a developmental continuum from tentative competency of the supervisee as a therapist to relative competency. Several authors have developed a theoretical model for explaining this process that takes place in supervision of marriage and family therapy trainees. However, whether this process of change occurs as presumed has had little scrutiny. This presentation will include the outcome of a study in which a coding system was developed for categorizing both the content and intention of statements made by supervisors and supervisees. Using audio tapes from supervisory sessions, interactions of three supervisors and five trainees were analyzed over a one-year period. The frequency of the different categories of interaction are compared in the early, middle, and the later stages. Change occurs as the balance shifts between the supervisee's need for reassurance and the family's need for therapy, not always in the presumed direction.

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OBSERVING CHANGE IN THE FAMILY THERAPY SUPERVISORY RELATIONSHIP

At the 1982 meeting of the National Council on Family Relations a proposed coding system for identifying categories of interactions in family therapy supervision was presented. These were developed at Northern Illinois University at the Family Center as we sought an effective method of observing change in the supervisory relationship. We had noted that two persons in particular, Ben Ard and Craig Everett have presented two different models of this process. Ard with change moving in a steady pattern, Everett with change moving in an unsteady manner. Ard saw these two professionals moving together through preceptorship, apprenticeship, mentorship, sponsorship and finally to peership relations. Craig Everett has presented a theoretical model of development in which he likens the process of supervision to that of differentiation such as the process of moving from childhood to adulthood. He identified the stages as Differentiation, Transition Stage I, Functional, Transition Stage II, and Individuation with the dependency transition periods being "more stormy" than the previous stages.

Two persons, one a MFT trainee and one a trained therapist, suggested definitions of categories independently after listening to a series of tapes. After much discussion and questioning, categories were redefined until it was agreed with the researchers that the categories were mutually exclusive and yet encompassed all statements heard on the tapes.

The 15 categories developed can be seen on the table.

TABLE 1 - CHANGE OVER TIME IN SUPERVISORY INTERACTION

CATEGORY OF RESPONSE	SUPERVISOR % of Total Interactions				SUPERVISEE % of Total Interactions			
	1-2mo	3-4mo	6-7mo	8-9mo	1-2mo	3-4mo	6-7mo	8-9mo
1. Exploring emotional responses to therapy situation or to supervision.	5	8	0	0	4	5	0	0
2. Expressing emotional response to the therapy situation or supervision	5	6	0	0	14	10	5	0
3. Encouraging and/or reasuring feelings and ideas	6	5	0	0	0	5	0	0
4. Reflecting by restating overt message and/or reflecting covert message	7	5	2	2	0	6	0	0
5. Giving of facts, expressing of feelings and/or interpretation in such a way as to impede responses from the other person	4	4	0	0	8	15	1	0
6. Giving of facts, expressing of feelings and/or interpretation in such a way as to encourage responses from the other person	5	0	0	0	6	5	1	0
7. Interrupting other person in such a way as to redirect communication	2	7	0	0	4	7	0	0
8. Requesting information for sense of equal participation	25	11	5	3	4	7	3	5
9. Giving information to give direction	10	18	18	6	4	5	0	0
10. Giving direction by exploratory questioning	10	13	10	15	0	6	0	0
11. Giving information with self-deprecation	0	2	0	0	2	2	0	2
12. Giving information with a statement of self-limitation	1	4	0	0	6	6	8	2
13. Giving information with a sense of command	1	5	2	0	1	1	0	0
14. Giving information with self-assurance	7	6	0	0	25	17	8	2
15. Sharing equally information and ideas	13	7	63	74	23	10	74	89

Having developed the categories, the two researchers listened to tapes of supervisory sessions and placed each statement in one of the fifteen classifications. The tapes from the first four months and the last four months of the supervisory sessions of the supervisors with six supervisees were analyzed. The fifth month was not taped due to holiday break disruptions. Four statements from the beginning, four statements from the middle, and four statements from the end were selected from the 25 minute therapy planning session the last week of each month. They produced 420 statements which were categorized according to the fifteen definitions.

One supervisor changed supervision sites so the number of tapes available the last four months were fewer than those available at the beginning. so for purposes of clarity we present the change observed in percentage rather than raw scores on the table. In analyzing the tables, attention is given to the pattern of frequencies of categories from the early through the later stages for both the supervisor and supervisee.

RESULTS

During the first two months, the supervisors spent much of their time requesting information for a sense of equal participation, category 8, (25%) and category 15, sharing equally information and ideas (13%). Secondary emphasis is on giving information to give direction, category 9, (10%). In months three and four they spent primary time on giving information to give direction, (18%) and giving direction by exploratory questioning, category 10, (13%). Secondary attention is requesting information for a sense of equal participation, category, or (11%), and little attention is given to sharing equally information and ideas. During this second time frame, requesting information for a sense of equal participation drops for the supervisor from 25% to 11%. Other changes are of note between these early periods: The increase in giving information to give

direction which increased from 10% to 18%, and sharing information and ideas which decreased from 13% to 7%.

The results for the supervisees were as follows: With these trainees the largest number of statements in the months one and two, the First Stage, were in category 14, giving information with self-assurance (25%), category 15, sharing equally information and ideas, amounted to (23%). Category 2, expressing emotional response to the therapy situation or to supervision represented (14%).

In the second Stage, months 3 and 4 the largest number of statements by the supervisees were in category 14, giving information with self-assurance (17%), and category 5, giving of facts, expressing of feelings and/or interpretation in such a way as to impede responses from the other person (15%). We note that the largest change was in category 15, sharing equally information and ideas which decreased from 23% to 10% of their statements.

The only category with a major increase is 5, giving of facts, expressing feelings and interpretations in such a way as to impede responses from the other person which increased from 8 to 15%.

The latter two time periods for the Supervisor are shown on the chart as follows: With a holiday break and more time to integrate the training experience we see a remarkable increase in category 15, sharing equally information and ideas. By the end of the academic year, 74% were in this category. Category 10, giving direction by exploratory questioning still is used but has maintained at a relatively constant level. Category 8, requesting information for a sense of equal participation has shown a steady decrease in frequency from the early to the later period.

The latter two periods for the supervisees also produced some remarkable increases for category 15, with 89% of the statements falling into the category

of sharing equally information and ideas. All the other categories had few or not statements during the latter two time periods.

DISCUSSION

Are these change patterns what might be expected? If one assumes that supervision steadily moves to a collegial stage, as Ard suggests they are somewhat surprising. Yes, in the beginning, the supervisor would need to spend more time in requesting information to understand the case and less time giving information because of lack of knowledge of the case. However, sharing equally information and ideas, decreases in the second time period. The implication is that equality in the relationship has not developed at this time. It is also noteworthy that the supervisor at the end of four months is committing 42% of the statements to three categories, requesting information (8), giving information (9), and giving direction (10).

In the early months the data appear to indicate that the supervisees began supervision with a sense of self-confidence, devoting many of their statements to information given with a sense of self-assurance and sharing equally information and ideas. The supervisees seemed to be quite open about expressing emotional response to the therapy situation or supervision. But by the 3rd and 4th months the supervisees gave fewer statements in all three of these categories, but increased the statements made in category 5, giving of facts expressing of feelings or interpretations in such a way as to impede responses from the other person. It appears that in relatively short period of time, the supervisees became less self-confident and possibly somewhat protective which is more typical of the Everett model of supervision of family therapy. Then if we look at the sharp increase in the category of sharing equally information and ideas, number 15, we see that the process of individuation probably has occurred, much like he describes it would.

CONCLUSION

The overall view of supervision indicated by this data is that the supervisory relationship exhibits a lot of open, sharing, trusting aspects on the part of both participants in a very short period of time, two months in this case. But the business of providing therapy to the family causes the supervisor to take a much more directive position, resulting in the supervisee taking a more protective and less self-assured position in the second period. Then with time, the supervisees' knowledge and skill achievement allow the supervisor to spend less time during the later months directing therapy for the family.

This study attempted to develop a system of observing change in the family therapy supervision relationship, and to apply that system over a nine-month period with trainees in family therapy and their supervisors in an academic training center. We compared our observations with two theoretical models of supervision in family therapy. To further test its usefulness, the system of categorization should be used to identify change in supervisory sessions with more advanced therapists in other professional settings with supervisors of varied experience. It should also be used to compare the change in supervision interaction with changes taking place in the family. The system of classification also may be useful for individual supervisors to analyze the development of their supervisees as well as their own supervision skill.

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